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AMENDMENTS TO THE CLAIMS

- 1-76. (Canceled)
- 77. (Previously Presented) The method according to claim 143, wherein the foreign T_H epitope is immunodominant in the animal.
- 78. (Previously Presented) The method according to claim 143, wherein the foreign $T_{\rm H}$ epitope is promiscuous.
- 79. (Previously presented) The method according to claim 78, wherein the at least one foreign $T_{\rm H}$ epitope is selected from a natural promiscuous T-cell epitope and an artificial MHC-II binding peptide sequence.
- 80. (Currently amended) The method according to claim 79, wherein the natural T_H epitope is selected from the group consisting of a Tetanus toxoid epitope-such as P2 or P30, a diphtheria toxoid epitope, an influenza virus hemagluttinin epitope, and a P. faciparum CS epitope.
- 81-84. (Canceled)
- 85. (Canceled) The method according to claim 133, wherein the T_H epitope containing IL5 polypeptide comprises a foreign T_H epitope in at least one of the loops 1.3 or in the amino acid residues C terminal to helix D, said loops and said helix D corresponding to those shown in Fig. 3 for human and murine IL5.
- 86. (Previously presented) The method according to claim 85, wherein the IL5 polypeptide is a human IL5 polypeptide.
- 87. (Previously presented) The method according to claim 86, wherein the human IL5 polypeptide has been modified by substituting at least one amino acid sequence in SEQ ID NO: 1 with at least one amino acid sequence of equal or different length thereby giving rise to a foreign T_H epitope, wherein substitute amino acid residues are selected from the group consisting of

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residues 87-90, residues 88-91, residues 32-43, residues 33-43, residues 59-64, residues 86-91, and residues 110-113.

88. (Canceled)

- 89. (Previously Presented) The method according to claim 143, wherein the T_H epitopecontaining IL5 polypeptide is administered together with an adjuvant which facilitates breaking of autotolerance to autoantigens.
- 90. (Currently Amended) The method according to claim 89, wherein the adjuvant is selected from the group consisting of-a-n_an immune targeting adjuvant; an immune modulating adjuvant; an oil formulation; a polymer; a micelle forming adjuvant; a saponin; an immunostimulating complex matrix (as ISCOM matrix); a-partiele;-DDA; aluminum adjuvants; DNA adjuvants; γ-inulin; and an encapsulating adjuvant.
- 91. (Currently amended) The method according to claim 143, wherein an effective amount of the T_H epitope-containing IL5 polypeptide is administered to the animal via a route selected from the parenteral route-such as the intradermal, the subdermal, the intracutaneous, the subcutaneous, and the intramuseular route; the peritoneal route; the oral route; the buccal route; the sublinqual route; the epidural route; the spinal route; the anal route; and the intracranial route.
- 92. (Previously presented) The method according to claim 91, wherein the effective amount is between 0.5 μ g and 2,000 μ g of the IL5 polypeptide.
- 93. (Previously presented) The method according to claim 91, which includes at least one administration of the IL5 polypeptide per year.
- 94. (Previously presented) The method according to claim 91, wherein the IL5 polypeptide is contained in a virtual lymph node (VLN) device.
- 95. (Previously presented) The method according to claim 90, wherein said immune modulating adjuvant is a member selected from the group consisting of a toxin, acytokin and a mycobacterial derivative.

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96-141. (Canceled)

142. (Currently Amended) A method for treating asthma or other chronic allergic conditions characterized by ensonophilia, the method comprising administering to a patient in need thereof an immunogenically effective amount of

- at least one T_H epitope-containing IL5 polypeptide wherein said T_H epitope-containing IL5 polypeptide differs from the animal's autologous IL5 polypeptide in that the T_H epitope-containing IL5 polypeptide comprises at least one foreign T_H epitope inserted into the amino acid sequence of the animal's autologous IL5 polypeptide, whereby immunization of the animal with the T_H epitope-containing IL5 polypeptide produces antibodies against the animal's autologous IL5 polypeptide whereby said T_H epitope-containing IL5 polypeptide reacts to the same extent with an antiserum raised against the animal's autologous IL5 as does the autologous IL5 and wherein the T_H epitope-containing IL5 polypeptide comprises a foreign T_H epitope in at least one of loops 1-3 or in the amino acid residues C-terminal to helix-D, said loops and said helix D corresponding to those shown in Fig. 3 for human and murine IL5, SEQ ID NO: 1 and SEQ ID NO: 12, respectively.
- 143. (Currently Amended) The method of in vivo down-regulation of interleukin 5 (IL5) activity in an animal, including a human being, the method comprising administering an immunogenically effective amount of
 - at least one T_H epitope-containing IL5 polypeptide wherein said T_H epitopecontaining IL5 polypeptide differs from the animal's autologous IL5 polypeptide in that the T_H epitope-containing IL5 polypeptide comprises at least one foreign T_H epitope introduced into the amino acid sequence of the animal's autologous IL5 polypeptide, whereby immunization of the animal with the T_H epitopecontaining IL5 polypeptide produces antibodies against the animal's autologous IL5 polypeptide and whereby said T_H epitope-containing IL5 polypeptide reacts

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to the same extent with an antiserum raised against the animal's autologous IL5 as does the autologous IL5 and wherein the T_H epitope-containing IL5 polypeptide comprises a foreign T_H epitope in at least one of loops 1-3 or in the amino acid residues C-terminal to helix D, said loops and said helix D corresponding to those shown in Fig. 3 for human and murine IL5, SEQ ID NO: 1, SEQ ID NO: 12, respectively.

144. (New) The method according to claim 80, wherein said Tetanus toxoid epitope is P2 or P30.

145. (New) The method according to claim 91, wherein said potential route is a member selected from the group consisting of the intradermal, the subdermal, the intracutaneous, the subcutaneous, and the intramuscular routes.

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